



## Complete Summary

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### TITLE

Health plan members' experiences: percentage of parents or guardians of health plan members who reported how often their child got care quickly.

### SOURCE(S)

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. various p.

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 3, Specifications for Survey Measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. 98 p.

### Measure Domain

#### PRIMARY MEASURE DOMAIN

Patient Experience

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

#### SECONDARY MEASURE DOMAIN

Access

### Brief Abstract

#### DESCRIPTION

The CAHPS Health Plan Survey 4.0H, Child Version provides information on parents' or guardians' experiences with their child's health plan. Results summarize member experiences through ratings, composites and individual question summary rates.

Five composite scores summarize responses in key areas.

1. Customer Service
2. Getting Care Quickly

3. Getting Needed Care
4. How Well Doctors Communicate
5. Shared Decision Making

For this "Getting Care Quickly" measure, parents or guardians indicate how often ("Never," "Sometimes," "Usually," or "Always") their children obtained the care they needed without long waits. The "Getting Care Quickly" composite measure is based on two questions in the CAHPS 4.0H Child Questionnaire.

## **RATIONALE**

NCQA's Committee on Performance Measurement has long felt that consumer experience with health care is a critical component of quality of care and is itself an outcome of care.

## **PRIMARY CLINICAL COMPONENT**

Health care; members' experiences; getting care quickly

## **DENOMINATOR DESCRIPTION**

Health plan members 17 years and younger whose parent or guardian answered the "Getting Care Quickly" questions on the CAHPS 4.0H Child Questionnaire (see the "Description of Case Finding" and "Denominator Inclusions/Exclusions" fields in the Complete Summary)

## **NUMERATOR DESCRIPTION**

The number of "Never," "Sometimes," "Usually," and "Always" responses on the "Getting Care Quickly" questions (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

## **Evidence Supporting the Measure**

### **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

## **Evidence Supporting Need for the Measure**

### **NEED FOR THE MEASURE**

Unspecified

## State of Use of the Measure

### STATE OF USE

Current routine use

### CURRENT USE

Accreditation  
Decision-making by businesses about health-plan purchasing  
Decision-making by consumers about health plan/provider choice  
External oversight/Medicaid  
External oversight/State government program  
Internal quality improvement

## Application of Measure in its Current Use

### CARE SETTING

Managed Care Plans

### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

### TARGET POPULATION AGE

Age less than or equal to 17 years

### TARGET POPULATION GENDER

Either male or female

### STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

## Characteristics of the Primary Clinical Component

### INCIDENCE/PREVALENCE

Unspecified

### ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

## **BURDEN OF ILLNESS**

Unspecified

## **UTILIZATION**

Unspecified

## **COSTS**

Unspecified

# **Institute of Medicine National Healthcare Quality Report Categories**

## **IOM CARE NEED**

End of Life Care  
Getting Better  
Living with Illness  
Staying Healthy

## **IOM DOMAIN**

Patient-centeredness  
Timeliness

# **Data Collection for the Measure**

## **CASE FINDING**

Both users and nonusers of care

## **DESCRIPTION OF CASE FINDING**

Health plan members 17 years and younger as of December 31st of the measurement year, who have been continuously enrolled in the health plan during the measurement year (commercial) or the last 6 months of the measurement year (Medicaid), with no more than one gap in enrollment of up to 45 days (commercial) or up to 1 month (Medicaid) during the measurement year and who were enrolled at the time the survey was completed

## **DENOMINATOR SAMPLING FRAME**

Enrollees or beneficiaries

## **DENOMINATOR INCLUSIONS/EXCLUSIONS**

**Inclusions**

Health plan members 17 years and younger whose parent or guardian answered the "Getting Care Quickly" questions on the CAHPS 4.0H Child Questionnaire. Include nonresponses\*.

\*Nonresponses:

- Refusal
- After maximum attempts
- Bad addresses
- Bad addresses and nonworking/unlisted phone number or member is unknown at the dialed phone number

**Exclusions**

- Deceased
- Does not meet *eligible population* criteria (see "Description of Case Finding" field)
- Language barrier

**RELATIONSHIP OF DENOMINATOR TO NUMERATOR**

All cases in the denominator are equally eligible to appear in the numerator

**DENOMINATOR (INDEX) EVENT**

Patient Characteristic

**DENOMINATOR TIME WINDOW**

Time window precedes index event

**NUMERATOR INCLUSIONS/EXCLUSIONS****Inclusions**

The number of "Never," "Sometimes," "Usually," and "Always" responses on the "Getting Care Quickly" questions

From the responses, a composite mean and variance score are calculated. A higher composite mean is associated with better quality. Additionally, composite global proportions and variances are calculated as well as item-specific question summary rates for each composite question.

**Note:** A questionnaire must have the final disposition code of *Complete and Valid* survey for inclusion in the survey results calculations.

Refer to the original measure documentation for details.

**Exclusions**

Unspecified

## **MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

### **NUMERATOR TIME WINDOW**

Fixed time period

### **DATA SOURCE**

Administrative data  
Patient survey

### **LEVEL OF DETERMINATION OF QUALITY**

Not Individual Case

### **PRE-EXISTING INSTRUMENT USED**

Unspecified

## **Computation of the Measure**

### **SCORING**

Non-weighted Score/Composite/Scale

### **INTERPRETATION OF SCORE**

Better quality is associated with a higher score

### **ALLOWANCE FOR PATIENT FACTORS**

Analysis by subgroup (stratification on patient factors, geographic factors, etc.)

### **DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS**

This measure requires that results are reported separately for the commercial and Medicaid product lines.

### **STANDARD OF COMPARISON**

External comparison at a point in time  
External comparison of time trends  
Internal time comparison

## Evaluation of Measure Properties

### EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

### ORIGINAL TITLE

Getting care quickly.

### MEASURE COLLECTION

[HEDIS® 2009: Healthcare Effectiveness Data and Information Set](#)

### MEASURE SET NAME

[Satisfaction with the Experience of Care](#)

### MEASURE SUBSET NAME

[CAHPS Health Plan Survey 4.0H, Child Version](#)

### DEVELOPER

National Committee for Quality Assurance

### FUNDING SOURCE(S)

Unspecified

### COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

National Committee for Quality Assurance's (NCQA's) Measurement Advisory Panels (MAPs) are composed of clinical and research experts with an understanding of quality performance measurement in the particular clinical content areas.

### FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

In order to fulfill National Committee for Quality Assurance's (NCQA's) mission and vision of improving health care quality through measurement, transparency and accountability, all participants in NCQA's expert panels are required to disclose potential conflicts of interest prior to their participation. The goal of this Conflict Policy is to ensure that decisions which impact development of NCQA's products and services are made as objectively as possible, without improper bias or influence.

**ADAPTATION**

Measure was adapted from another source.

**PARENT MEASURE**

CAHPS 4.0 Health Plan Survey (Child Questionnaire)

**RELEASE DATE**

1997 Jan

**REVISION DATE**

2008 Jul

**MEASURE STATUS**

This is the current release of the measure.

This measure updates a previous version: National Committee for Quality Assurance (NCQA). HEDIS 2008: Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications. Washington (DC): National Committee for Quality Assurance (NCQA); 2007 Jul. various p.

**SOURCE(S)**

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. various p.

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 3, Specifications for Survey Measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. 98 p.

**MEASURE AVAILABILITY**

The individual measure, "Getting Care Quickly," is published in "HEDIS® 2009. Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications."

For more information, contact the National Committee for Quality Assurance (NCQA) at 1100 13th Street, NW, Suite 1000, Washington, DC 20005; Telephone: 202-955-3500; Fax: 202-955-3599; Web site: [www.ncqa.org](http://www.ncqa.org).

**NQMC STATUS**

This NQMC summary was completed by ECRI on March 27, 2007. The information was not verified by the measure developer. This NQMC summary was updated by ECRI Institute on March 17, 2008. The information was verified by the measure



developer on April 24, 2008. This NQMC summary was updated again by ECRI Institute on February 6, 2009. The information was verified by the measure developer on May 12, 2009.

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